

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000054507

FILED  
Feb 06, 2007  
Secretary of State

Entity Name: GENERAL LABOR STAFFING SERVICES, INC.

**Current Principal Place of Business:**

1709 BANKS ROAD  
MARGATE, FL 33063

**New Principal Place of Business:**

1709 BANKS ROAD  
MARGATE, FL 33063 US

**Current Mailing Address:**

1709 BANKS ROAD  
MARGATE, FL 33063

**New Mailing Address:**

1709 BANKS ROAD  
MARGATE, FL 33063 US

FEI Number: 65-1112591

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SCHWARTZ, STEVEN G ESQ.  
6751 NORTH FEDERAL HIGHWAY  
SUITE 400  
BOCA RATON, FL 33487 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CALIFANO, GERRY  
Address: 2333 N STATE RD 7  
City-St-Zip: MARGATE, FL 33063

Title: VSTD ( ) Delete  
Name: MINEI, LAWRENCE J  
Address: 2333 N STATE RD 7  
City-St-Zip: MARGATE, FL 33063

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: CALIFANO, GERRY  
Address: 1709 BANKS ROAD  
City-St-Zip: MARGATE, FL 33063 US

Title: VSTD (X) Change ( ) Addition  
Name: MINEI, LAWRENCE J  
Address: 1709 BANKS ROAD  
City-St-Zip: MARGATE, FL 33063 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAWRENCE J. MINEI

VSTD

02/06/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date